



Lovin' Life Fitness Center Bohrer Park, Summit Hall Farm Customer Survey

On behalf of the City of Gaithersburg Department of Parks, Recreation and Culture, I want to thank you for choosing our facility to meet your fitness and exercise needs. Please take a moment to complete the following survey to help us evaluate our services so we may provide the best possible facility and customer satisfaction.

Contact Information:

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Community Facility Director
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1. What type of membership plan do you utilize?

____ daily admission
____ 25-admission pass
____ annual membership

2. Please indicate your age and fitness level.

| | |
|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Beginner | <input type="checkbox"/> 13 - 20 |
| <input type="checkbox"/> Intermediate | <input type="checkbox"/> 21 - 40 |
| <input type="checkbox"/> Advance | <input type="checkbox"/> 41 - 60 |
| | <input type="checkbox"/> 60 or above |

3. I took advantage of the complimentary fitness orientation.

Yes ☐ No ☐

If no, why?

4. The facility staff is courteous and professional.

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| strongly agree | | | | strongly disagree |
| 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

5. I will continue to use the Lovin' Life Fitness Center and/or recommend your facility to others.

| | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| strongly agree | | | | strongly disagree |
| 1 | 2 | 3 | 4 | 5 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

6. **The center is always clean, appropriately arranged, and desirable.**
strongly agree 1 2 3 4 5 strongly disagree
☐ ☐ ☐ ☐ ☐
7. **The admission fees are reasonably priced.**
strongly agree 1 2 3 4 5 strongly disagree
☐ ☐ ☐ ☐ ☐
8. **I am satisfied with the diversity of strength training equipment.**
strongly agree 1 2 3 4 5 strongly disagree
☐ ☐ ☐ ☐ ☐
9. **How often do you visit our facility?**
☐ 4 or more times a week
☐ 2-3 times a week
☐ once a week
☐ other _____
10. **The cardiovascular equipment provided meets my needs.**
strongly agree 1 2 3 4 5 strongly disagree
☐ ☐ ☐ ☐ ☐
11. **The locker room facilities meet my needs.**
strongly agree 1 2 3 4 5 strongly disagree
☐ ☐ ☐ ☐ ☐
12. **Is the room temperature comfortable?**
Yes ☐ No ☐
13. **The Fitness Center's hours of operation meet my scheduling needs.**
strongly agree 1 2 3 4 5 strongly disagree
☐ ☐ ☐ ☐ ☐
14. **Do you have any suggestions or comments that may help to improve the Fitness Center?**

Optional

Name: _____

Address:

Phone: _____